

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.											
09/383,318	08/26/99	530	1646 1652	6004.200-US											
APPLICANT	KARIMA SRIH BELGHOUTH, SFAX, TUNISIA; MONICA MBZOHANI, SFAX, TUNESIA; RADHOUANE ELLOUZ, SFAX, TUNISIA; SAMIR BEJAR, SFAX, TUNISIA.														
	CONTINUING DOMESTIC DATA*** VERIFIED <u>[Signature]</u>														
	371 (NAT'L STAGE) DATA*** VERIFIED <u>[Signature]</u>														
ADDRESS	**FOREIGN APPLICATIONS***** VERIFIED TUNISIA 99.100 05/26/99 <u>[Signature]</u>														
	IF REQUIRED, FOREIGN FILING LICENSE GRANTED 09/15/99														
	<table border="1"><tr><td>Foreign Priority claimed 35 USC 119 (a-d) conditions met</td><td><input checked="" type="checkbox"/> Yes <input type="checkbox"/> no <input checked="" type="checkbox"/> Met after Allowance</td><td>STATE OR COUNTRY TNX</td><td>SHEETS DRAWING 5</td><td>TOTAL CLAIMS 22</td><td>INDEPENDENT CLAIMS 4</td></tr><tr><td colspan="2">Verified and Acknowledged Examiner's Initials _____ Initials _____</td><td colspan="4"></td></tr></table>				Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> no <input checked="" type="checkbox"/> Met after Allowance	STATE OR COUNTRY TNX	SHEETS DRAWING 5	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 4	Verified and Acknowledged Examiner's Initials _____ Initials _____				
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Verified and Acknowledged Examiner's Initials _____ Initials _____															
TITLE	STEVE T ZELSON ESQ NOVO NORDISK OF NORTH AMERICA INC 405 LEXINGTON AVENUE SUITE 6400 NEW YORK NY 10174-6400														
FILING FEE RECEIVED \$1,004		FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following: <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit													